



STATE OF MICHIGAN

DEPARTMENT OF COMMUNITY HEALTH
LANSING

JENNIFER M. GRANHOLM
GOVERNOR

JANET OLSZEWSKI
DIRECTOR

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Dear Provider:

The Michigan Department of Community Health is announcing the activation of its contingency plan in regard to HIPAA compliance on transactions and code sets for Medicaid providers.

The federal government is allowing additional time for physicians and hospitals that send in claims for Medicare and Medicaid to become compliant under a new federal law, indicating that it is taking longer than anticipated for some physicians and hospitals to comply with mandated electronic claims and transaction formats.

Michigan Medicaid's contingency plan is to continue to accept and process electronic transactions that are submitted in current formats from all providers. **However, the new medical codes and other mandated national code sets must be utilized effective October 1, 2003, as previously announced.**

Medicaid will continue to send out the current electronic remittance advice and accept the following electronic claim formats during the transition period:

Professional Claims: ANSI X12N 837 v. 3051, 4010, and 4010A1
Institutional Claims: EMC 5, ANSI X12N 837 v. 4010 and 4010A1
Dental Claims: ANSI X12N 837 v. 4010 and 4010A1

The Department will continue to accept paper claims on UB-92 (CMS-1450), CMS-1500, and ADA-2000 forms.

Medicaid will cooperate with its trading partners as they continue to move toward HIPAA compliance. Business to Business Testing will continue, and the validation tools will remain available. These tools, and information on Business to Business Testing, may be accessed via the MDCH web site at: <http://www.michigan.gov/mdch> (click on "Providers", and then "HIPAA").

This contingency plan is consistent with the Centers for Medicare and Medicaid Services' announced on September 23, 2003. It also aligns with Blue Cross Blue Shield of Michigan's plan, thus allowing the four major payers in Michigan to continue to coordinate efforts and have a consistent approach for thousands of physician offices, hospitals and other providers.

We will continue to monitor the submission rates of the 837 v. 4010A1 to document movement toward compliance and to prove good faith efforts by all parties.

If you have any questions regarding the contingency plan or HIPAA codes and transactions requirements, you may call the Provider Inquiry Line at 1-800-292-2550. They will assist you or direct your call to the appropriate Department staff. You may also e-mail questions to ProviderSupport@michigan.gov.

Sincerely,


Paul Reinhart, Director
Medical Services Administration

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